THE LANCET Respiratory Medicine

Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

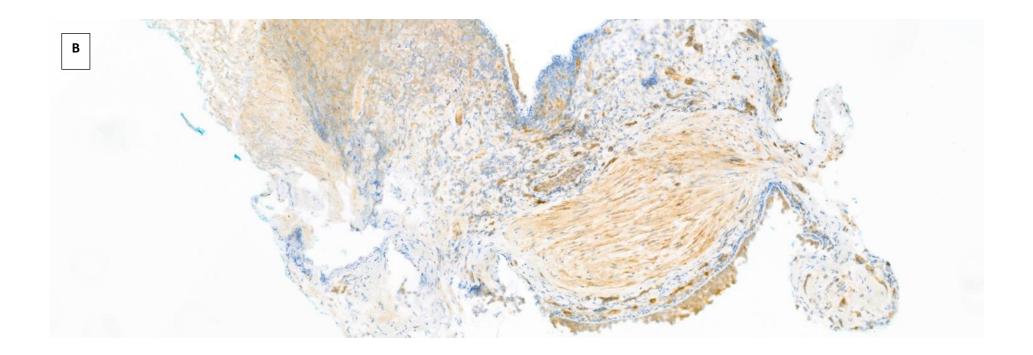
Supplement to: van de Veerdonk FL, Brüggemann RJM, Vos S, et al. COVID-19-associated Aspergillus tracheobronchitis: the interplay between viral tropism, host defence, and fungal invasion. *Lancet Respir Med* 2021; published online May 26. http://dx.doi.org/10.1016/S2213-2600(21)00138-7.

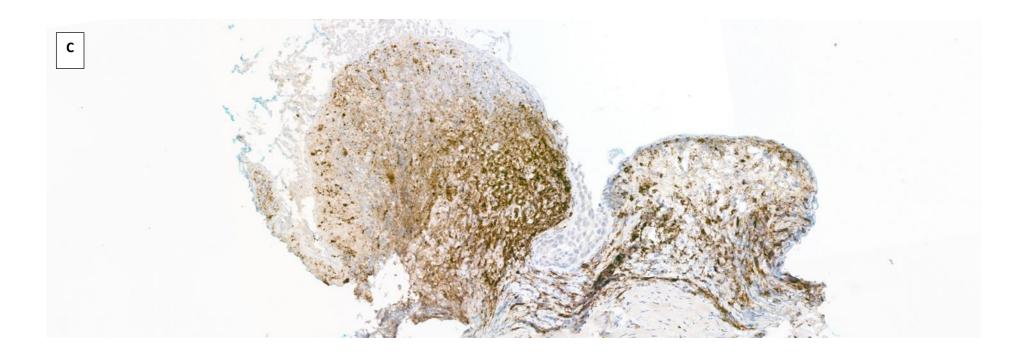
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Figure 1. Bronchial epithelium showing ACE2R expression (A&B). In the stroma nuclear debris, neutrophils, some macrosialin-positive histiocytes (C) and a few CD8 positive cytotoxic T-lymphocytes (D) are seen.







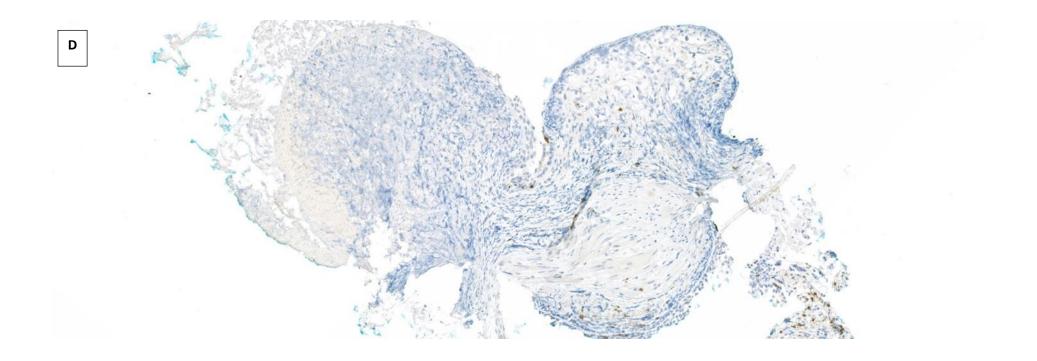


Figure 2. a) Trachea with an ulcerative lesion with necrosis reaching until the perichondrial tissue (H&E). b) Fungal hyphae with signs of budding (H&E) and c) Grocott's stain. d) Absence of SARS-Cov-2 spike (S) protein. e) CD68 stain showing numerous histiocytes. f) CD8 stain showing a few spread out cytotoxic T-cells.

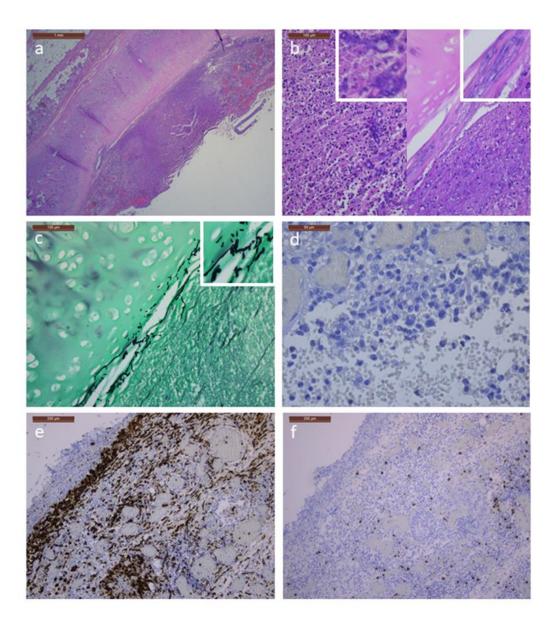


Figure 3. Grocott stain of invasive *Aspergillus* tracheobronchitis in a patient with severe Influenza. Septate hyphae are visible and two vesicles with phialides, and *Aspergillus* spores in the proximity of the vesicles.

